

2008

IDAHO INDIVIDUAL INCOME TAX RETURN

AME	NDED RETUR	N, check the box. State Use Only					
		e 6 for the reasons					
	nending and ent						
For	calendar year	· 2008, or fiscal year beginning, ending	ity Number (required)				
	Your first name a						
ĸ		Spouse's Social S	Security Number (required)				
PLEASE PRINT OR TYPE	Spouse's first nar		-				
	Mailing address		Do you need Idaho				
		in 2008	income tax forms				
	City, State, and Z	ip Code Spouse deceased	mailed to you next year?	?			
_		☐ ✓ in 2008	■ Yes ■ No				
FILI	NG STATUS.	f filing married joint or separate return, enter spouse's name and Social Security number above	e.				
1.	Single 2.	Married filing joint return 3. Married filing separate return 4. Head of household 5.	Qualifying widow(er)				
6.	EXEMPTIONS	. If someone can claim you as a Enter "1" in boxes 6a, Yourself a. Election campaign fur	nd .				
		ne tax to go to the Idaho					
C.	List vour depe	ndents. If more than four dependents, continue on Form 39R.	d (\$2 on joint return).				
		number here c.	7. // // 0. 0				
<u>F</u>	irst name	Last name Social Security Number 7. Yourself 8. Spouse	7. Yourself 8. Spou	use □			
-		Constitution =	Republican	4			
_		Democratic	No Specific	4			
-		Libertarian Libertarian	None				
- Н	Total exemption	ons. Add lines 6a through 6c. Must match federal return d.					
		ee instructions, page 7.					
		ir federal adjusted gross income from federal Form 1040, line 37; federal Form 1040A, line 21;					
ä	or federa	9	00				
罡	10. Additions	10	00				
Ä	11. Total. Ad	11	00				
Ϋ́	12. Subtraction	12	00				
ΡĀ	13. TOTAL A						
당 당	If you have	13	00				
ATTACH PAYMENT HERE	TAX COMPU						
⋖		a. If age 65 or older Yourself Dyouse					
	Standard Deduction	14. CHECK— b. If blind • Yourself • Spouse					
	For Most	c. If your parent or someone else can claim you as a dependent,					
RE	People	check here and enter zero on lines 20 and 45. •					
es here	Single or	15. Itemized deductions. Attach federal Schedule A. Federal limits apply	15	00			
	Married filing Separately:	16. All state and local income or general sales taxes included on					
COPIES	\$5,450	federal Schedule A, line 5	16	00			
	Head of	17. Subtract line 16 from line 15. If you do not use foderal Schodule A enter zero	17	00			
W-2	Household: \begin{aligned} \text{\$8,000} \end{aligned}	17. Subtract line 16 from line 15. If you do not use federal Schedule A, enter zero					
ATTACH STATE		18. Standard deduction. See instructions, page 7, if you checked any boxes on line 14	18	00			
	Married filing Jointly or	19. Subtract the LARGER of line 17 or 18 from line 13. If less than zero, enter zero	19	00			
	Qualifying	20. Multiply \$3,500 by the number of exemptions claimed on line 6d. Federal limits apply	20	00			
	Widow(er): \$10,900	21. Taxable income. Subtract line 20 from line 19. If less than zero, enter zero	21	00			
		22. Tax from tables or rate schedule. See instructions, page 35	22	00			
		EE, 197 HOTH REPRODUCTING CONTOURING COOL HIGH WORLD BY DRUG CO					

Continue to page 2.

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056 ATTACH A COMPLETE COPY OF YOUR FEDERAL RETURN.



Form 40 - 2008 EF000089p2 10-10-08

23.	Tax amount from line 22				23		00			
CRE	DITS. Limits apply. See instructions, page 8.		0.4	00						
24.	Income tax paid to other states. Attach Form 39R and a copy of the	e other state returns •	24	00						
25.	Credit for contributions to Idaho educational entities		25	00						
	Credit for contributions to Idaho youth and rehabilitation facilities		26	00						
	Credit for live organ donation expenses		27	00						
	Total business income tax credits from Form 44, Part I, line 12.		28	00						
	TOTAL CREDITS. Add lines 24 through 28				29		00			
	Subtract line 29 from line 23. If line 29 is more than line 23, ent	30		00						
	ER TAXES. See instructions, page 9. Fuels tax due. Attach Form 75	31		00						
	Sales/Use tax due on mail order, Internet, and other nontaxed		32		00					
	Total tax from recapture of income tax credits from Form 44, P.		33		00					
	Tax from recapture of qualified investment exemption (QIE). A				34		00			
	Permanent building fund. Check the box if you are receiving to				35	10	00			
	TOTAL TAX. Add lines 30 through 35		•		36		00			
	ATIONS. See instructions, page 9. I wish to donate to:									
37.	Nongame Wildlife Conservation Fund • 38	B. Children's Trust Fund.								
39.	Special Olympics Idaho 40	. Idaho Guard and Rese	erve Family							
41.	American Red Cross of Greater Idaho Fund . • 42	. Veterans Support Fund	t							
43.	Enter total donations. Add lines 37 through 42				43		00			
44.	TOTAL TAX PLUS DONATIONS. Add lines 36 and 43				44		00			
	IENTS and OTHER CREDITS. Complete the grocery credit		_							
45.	Grocery credit. Computed Amount (from worksheet)						<u>//////</u>			
	To donate your grocery credit to the Cooperative Welfare Fund	I, check the box and ente	er zero on line 4	D	45		00			
	To receive your grocery credit, enter the computed amount on Maintaining a home for family member age 65 or older, or devo				46		00			
	Special fuels tax refund Gasoline tax r		47		00					
	•	48		00						
	8. Idaho income tax withheld. Attach Form(s) W-2 9. 2008 Form 51 payment(s) and amount applied from 2007 return • • • • • • • • • • • • • • • • • • •						00			
	TOTAL PAYMENTS AND OTHER CREDITS. Add lines 45 thro		50		00					
	DUE or REFUND. See instructions, page 11. If line 44 is more					TO LINE 54.	00			
							1			
51.	TAX DUE. Subtract line 50 from line 44	····· •			00					
52	Penalty Interest from the due date	Enter total			52		1			
	Check box if penalty is due to an ineligible withdrawal from an				52		00			
		•			F2					
55.	TOTAL DUE. Add lines 51 and 52. Make check or money ord	ISSIO11 •	53		00					
54.	OVERPAID. Line 50 minus lines 44 and 52. This is the amoun	54		00						
							1			
55.	REFUND. Amount of line 54 to be refunded to you						00			
56.	ESTIMATED TAX. Amount of line 54 to be applied to your 200	_	56		1					
					30		00			
57.	DIRECT DEPOSIT. See instructions, page 12.					Type of •	hecking			
■Rou	ting No Account No Account No.					Account:	avings			
A M E	NDED RETURN ONLY. Complete this section to determine	vour tax due or refund	Soo instruction	ne			T			
	Total tax due (line 53) or overpayment (line 54) on this return				58		00			
	9. Refund from original return plus additional refunds						00			
	60. Tax paid with original return plus additional tax paid						00			
	61. Amended tax due or refund. Add lines 58 and 59 and subtract line 60						00			
	61. Amended tax due or retund. Add lines 58 and 59 and subtract line 60									
<u></u>	Under penalties of perjury, I declare that to the best of my knowledge	and belief this return is true,	correct and compl	ete. See instru	ictions.					
SIGN		Spouse's signature (if a joint return, BOTH MUST SIGN)			Date Daytime phone		one			
HERE		• •								
Paid p	reparer's signature	Preparer's EIN, SSN, or PTIN								
Addres	s and phone number	-								
20	•									
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